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INDICATION FORM**

Application Number	10/588,387
Filing Date	08/04/2006
First Named Inventor	Mauro Zenobi
Title	APPARATUS FOR RECEIVING, STORING
Art Unit	
Examiner Name	
Attorney Docket Number	47966.25.1

I hereby revoke all previous powers of attorney given in the above-identified application.

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022859

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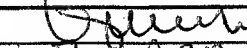
Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	OCT 10, 2006
Name	LEONARDO M. CAPPELLONI	Telephone	
Title and Company	DIR. Research & Dev., Angelantoni Industrie SPA		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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